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PTO/SB/01 (12-97)
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Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	Attorney Docket Number	MLD-035		
	First Named Inventor	David J. Roach		
	COMPLETE IF KNOWN			
	Application Number	09 / 137,675		
	Filing Date	December 13, 2000		
	Group Art Unit			
<input type="checkbox"/> Declaration Submitted with Initial Filing	OR	<input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

APPARATUS AND METHOD FOR FILLING AND CLEANING CHANNELS AND INLET PORTS IN MICROCHIPS USED FOR BIOLOGICAL ANALYSIS

the specification of which
☐ is attached hereto
OR
☒ was filed on (MM/DD/YYYY) **12/13/2000** as United States Application Number or PCT International Application Number **09/737,675** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

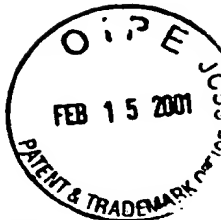
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)

☐ Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☒ Customer Number **003897** ☐ Registered practitioner(s) name/registration number listed below

Place Customer Number Bar Code Label here

Name	Registration Number	Name	Registration Number
Thomas Schneck	24,518	David M. Schneck	43,094
Mark Protsik	31,788	Gina McCarthy	42,986
John P. McGuire, Jr.	41,984		

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number **003897** or Bar Code Label ☐ Correspondence address below

Name	Thomas Schneck				
Address	P.O. Box 2-E				
Address					
City	San Jose	State	CA	ZIP	95109-0005
Country	USA	Telephone	408/297-9733	Fax	408/297-9748

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that wilful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such wilful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))	Family Name or Surname
David J.	Roach

Inventor's Signature David J. Roach Date 2/6/01

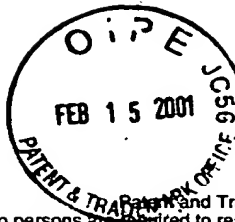
Residence: City Los Gatos State CA Country U.S.A. Citizenship U.S.A.

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City Los Gatos State CA ZIP 95032 Country U.S.A.

☒ Additional inventors are being named on the 2 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto



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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>2</u>
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Robert T.				Loder, Jr.			
Inventor's Signature	<i>Robert T. Loder Jr</i>					Date	2/6/01
Residence: City	Sunnyvale	State	CA	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address	695 Ontario Court, #2						
Post Office Address							
City	Sunnyvale	State	CA	ZIP	94087	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Thomas M.				Armstrong			
Inventor's Signature	<i>Thomas Armstrong</i>					Date	2-98-01
Residence: City	Santa Clara	State	CA	Country	U.S.A.	Citizenship	U.S.A.
Post Office Address	1556 Halford Ave., Ste. 423						
Post Office Address							
City	Santa Clara	State	CA	ZIP	95051	Country	U.S.A.
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Dennis W.				Harris			
Inventor's Signature	<i>DW Harris</i>					Date	2/12/01
Residence: City	Mt. View	State	CA	Country	U.S.A.	Citizenship	U.K.
Post Office Address	320 Chesley Avenue						
Post Office Address							
City	Mt. View	State	CA	ZIP	94040	Country	U.S.A.

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page 2 of 2
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Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor													
Given Name (first and middle [if any])				Family Name or Surname											
Stevan B.				Jovanovich											
Inventor's Signature		<i>Stevan B Jovanovich</i>				Date		2/12/01							
Residence: City		Livermore		State		CA		Country		U.S.A.		Citizenship		U.S.A.	
Post Office Address		723 Hazel Street													
Post Office Address															
City		Livermore		State		CA		ZIP		94550		Country		U.S.A.	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor													
Given Name (first and middle [if any])				Family Name or Surname											
Richard F.				Johnston											
Inventor's Signature		<i>Richard F Johnston</i>				Date		2-6-01							
Residence: City		Murphys		State		CA		Country		U.S.A.		Citizenship		U.S.A.	
Post Office Address		4551 Murphys Camp Road													
Post Office Address															
City		Murphys		State		CA		ZIP		95247		Country		U.S.A.	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor													
Given Name (first and middle [if any])				Family Name or Surname											
Inventor's Signature						Date									
Residence: City				State				Country				Citizenship			
Post Office Address															
Post Office Address															
City				State				ZIP				Country			

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